

## **1. Coordinated Transportation**

Under this method, a district would solicit a transportation provider (coordinator) who would either deliver, or subcontract with other transportation providers to deliver, all necessary non-emergency transportation for that district at a flat monthly reimbursement amount. Regardless of the actual number of transports delivered, the district will pay the coordinator the same monthly amount agreed upon under the contract.

The district refers to the coordinator recipients who are in need of transportation to necessary medical care and services. The coordinator, in turn, achieves efficiencies by establishing fixed routes and grouping transports to medical appointments. The coordinator also uses public transportation more effectively.

When feasible or necessary, the coordinator will subcontract with another provider, such as an ambulance provider, to deliver appropriate non-emergency transportation. However, the coordinator will not be required to subcontract with every transportation provider who wishes to be a subcontractee.

Under this method, the coordinator is the only participating Medicaid transportation provider in the district. Recipients who require transportation services to necessary medical care and services must use the coordinator for their transportation needs. Even though there may be other transportation providers available in the community, no Medicaid reimbursement will be made to other transportation providers.

Recipients will not have the freedom to choose any transportation provider, even those providers who subcontract with the coordinator. It will be the coordinator's decision how the recipient will be transported to necessary medical care and services.

The coordinator will be required to follow the regulations and policy of the Department as they pertain to transportation services, and must compel all subcontractees to comply with those same regulations and policy. The district will monitor the performance of the coordinator to ensure compliance with regulation and policy.

Recipients will maintain their right to a Department conference and Fair Hearing regarding any modification or denial of one's request for transportation services.

Payments to a coordinator may be made as a program expenditure, and will be eligible for federal financial participation at the medical services rate.

## **2. Regional or District-Wide Rate Setting**

Under this method, either a district or a group of contiguous districts will establish a reimbursement amount for a mode of transportation in the region encompassed by those districts or, for district-wide rate setting, a single rate will be established throughout an entire district. The new amount will be less than the highest blended amount previously reimbursed but at a level which would attract enough provider participation to assure that mode of transportation to necessary medical care and services.

A recipient's freedom to choose among providers will be limited to those transportation providers who agree to provide transportation at the new amount. Providers who choose not to accept the new reimbursement amount will no longer be participating in the Medicaid program in those districts.

Participating providers will be required to follow the regulations and policy of the Department as they pertain to transportation services. The district will monitor the performance of the providers to ensure compliance with regulation and policy.

Recipients will maintain their right to a Department conference and fair hearing regarding any modification or denial of one's request for transportation services.

Payments to providers may be made as a program expenditure, and will be eligible for federal financial participation at the medical services rate.

### 3. Competitive Bid Procurement

Under this method, a district or group of districts will solicit bids for the transportation of a group of recipients who are transported on a daily or other regular basis to necessary medical care and services. The transportation provider who submits the most qualified and cost efficient bid will be selected to transport the group of recipients. The reimbursement amount may be either a lump sum monthly amount or a per person per day amount during the life of the contract.

Recipients will be assured transportation by the selected bidder to necessary medical care and services.

Recipients will not be allowed to choose another transportation provider, even if the other provider is willing to provide the transportation service at the same reimbursement amount paid to the selected bidder. This limitation will prevent other transportation providers from delivering the shortest, most efficient transports while leaving the farthest, most costly transports to the selected bidder. Such a practice undermines the solicitation process for the transport of a group.

The selected provider, called the coordinator, will be required to follow the regulations and policy of the Department as they pertain to transportation services. The district will monitor the performance of the coordinator to ensure compliance with regulation and policy.

Payments to a coordinator may be made as a program expenditure, and will be eligible for federal financial participation at the medical services rate.

#### **4. Cost Effective/Directed Transportation**

Under this method, the district can direct the recipient to use the least expensive provider, available at the time the service is needed, among all providers available to perform the required mode of transportation. The district will have agreements to reimburse other providers of the same mode of transportation at a higher amount. However, these other providers will not be used while the least expensive provider has available capacity to transport recipients. A recipient will not have the freedom to choose another provider when directed to use another less costly provider. Even when another provider is willing and able to transport a recipient, the recipient must accept the transportation services of the provider designated by the district.

The district may designate different providers on different transports, based upon provider availability, type of transportation needed, and level of reimbursement. The district's decision to designate transportation providers will be based upon which provider will accept the lowest level of reimbursement and is available at the time of the transport.

A recipient's freedom to choose among providers will be limited to those transportation providers who agree to provide transportation at the new amount. Providers who choose not to accept the new reimbursement amount will no longer be participating in the Medicaid program in those districts.

Participating providers will be required to follow the regulations and policy of the Department as they pertain to transportation services. The district will monitor the performance of the providers to ensure compliance with regulation and policy.

Recipients will maintain their right to a Department conference and fair hearing regarding any modification or denial of one's request for transportation services.

Payments to providers may be made as a program expenditure, and will be eligible for federal financial participation at the medical services rate.

## **5. Select Arrangement for Transportation Efficiencies**

Under this method, the district will enter into an arrangement with a provider or a select group of providers to meet the transportation needs of recipients traveling to medical facilities. For instance, a district may choose a taxi provider to provide all non-emergency ambulatory transportation to a regional medical center. Due to the volume and routing of trips, the provider is able to deliver this transportation at an amount lower than that purchased through multiple providers. A recipient will not have the freedom to choose another transportation provider when the recipient requires transportation to the particular medical center.

An arrangement may also be made with a public transit operator who may use its existing public transit system to complement the transportation of recipients to particular medical facilities. Recipients would be expected to use the public transit system to the medical facility in the same manner as others in the public.

A recipient's freedom to choose among providers will be limited to the transportation provider who agrees to provide transportation at the new amount.

The provider will be required to follow the regulations and policy of the Department as they pertain to transportation services. The district will monitor the performance of the provider to ensure compliance with regulation and policy.

Recipients will maintain their right to a Department conference and fair hearing regarding any modification or denial of one's request for transportation services.

Payments to providers may be made as a program expenditure, and will be eligible for federal financial participation at the medical services rate.